



11/08/99

BOX NEW PATENT APPLICATION
 Assistant Commissioner for Patents
 Washington, D.C. 20231

HAVERSTOCK & OWENS LLP
 260 Sheridan Avenue, Suite 420
 Palo Alto, California 94306
 (650) 833-0160

Attorney Docket No.: ICOM-00600

NEW APPLICATION TRANSMITTAL

Sir:

Transmitted herewith for filing is the patent application of Inventor: Carl P. Daniel

Title: **SYSTEM FOR TRANSMITTING VIDEO IMAGES OVER A COMPUTER NETWORK TO A REMOTE RECEIVER****CERTIFICATION UNDER 37 CFR § 1.10**

I hereby certify that this New Application and the documents referred to as enclosed herein are being deposited with the United States Postal Service on this date, November 8, 1999, in an envelope bearing "Express Mail Post Office To Addressee" Mailing Label Number EL454480972US addressed to: **PATENT APPLICATION**, Assistant Commissioner for Patents, Washington, D.C. 20231.

Nancy Affleck
 (Name of Person Mailing Paper)



Signature

Enclosed are:

1. The papers required for filing date under CFR § 1.53(b):

| | | | |
|--|---|---------------------------------------|-----------------------|
| <input checked="" type="checkbox"/> 24 | Pages of Specification (including claims); | <input type="checkbox"/> 2 | Sheet(s) of Drawings. |
| <input checked="" type="checkbox"/> X | Declaration or Oath (unexecuted; combined with Power of Attorney) | <input checked="" type="checkbox"/> X | Formal |
| <input checked="" type="checkbox"/> X | Power of Attorney (unexecuted; combined with Declaration) | <input type="checkbox"/> | Informal |
| <input type="checkbox"/> - | Assignment of the Invention to <u>IntraCom Corporation</u> (including Form PTO-1595). | | |

Fee Calculation

- Amendment changing number of claims or deleting multiple dependencies is enclosed.

CLAIMS AS FILED

| | Number Filed | Number Extra | Rate | Basic Fee |
|-------------------------------------|--------------|--------------|------------------------|------------|
| | | | | \$760.00 |
| Total Claims | 35 - 20 = | 15 | \$18.00 | 270.00 |
| Independent Claims | 4 - 3 = | 1 | \$78.00 | 78.00 |
| Multiple Dependent claim(s), if any | | | \$260.00 | 0.00 |
| | | | Filing Fee Calculation | \$1,108.00 |

6. Verified Statement (Declaration) Claiming Small Entity Status (unexecuted)

50% Filing Fee Reduction (if applicable) \$554.00

7. Other Fees

- Assignment Recordation Fee
 - Other 0.00

TOTAL FEES ENCLOSED \$554.00

8. Payment of Fees

Check in the amount of \$554.00 enclosed.

9. Authorization to Charge Additional Fees

The Commissioner is hereby authorized to charge any additional fees (or credit any overpayment) associated with this communication and which may be required under 37 CFR § 1.16 or § 1.17 to Account No. 08-1275. An originally executed duplicate of this transmittal is enclosed for this purpose.

10. Information Disclosure Statement

11. Return Receipt Postcard

Dated: November 8, 1999

By: Jonathan O. Owens
 Name: Jonathan O. Owens
 Registration No.: 37,902

JC498 U.S. PTO
 09/436432
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